

PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 200.00

**Complete If Known**

|                      |                            |
|----------------------|----------------------------|
| Application Number   | 10/044,998                 |
| Filing Date          | 01/10/2002                 |
| First Named Inventor | Krishna Kishore Yellepeddy |
| Examiner Name        | Cindy Nguyen               |
| Art Unit             | 2161                       |
| Attorney Docket No.  | AUS920010273US1            |

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 09-0447 Deposit Account Name: International Bus. Machs.

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☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|
|--------------|--------------|----------|---------------|

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
|---------------|--------------|----------|---------------|

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
|--------------|--------------|--|----------|---------------|

- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

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| SUBMITTED BY      |                      |                                   |                     |
| Signature         | <u>Robert Frantz</u> | Registration No. (Attorney/Agent) | 42,553              |
| Name (Print/Type) | Robert H. Frantz     | Telephone                         | 405-812-5813        |
|                   |                      | Date                              | <u>May 25, 2005</u> |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FRANKLIN GRAY PATENTS, LLC  
ROBERT H. FRANTZ, REGISTERED US PATENT AGENT

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## FACSIMILE TRANSMISSION

TO: Examiner Cindy Nguyen  
U.S. Patent and Trademark Office  
GAU 2161  
Fax: 703-872-9306 (Central Fax Server)

FROM: Robert H. Frantz  
Franklin Gray Patents, LLC  
Tel: 405-812-5613  
Fax: 405-440-2465

DATE: May 25, 2005

PAGES: 17 (inclusive)

In re the Application of:

Krishna Kishore Yellepeddy )

Serial Number: 10/044,998 )

Group: 2161

Docket Number: AUS920010273US1 )

Examiner: Cindy Nguyen

Filed on: 01/10/2002 )

For: "System and Method for )

Metadirectory Differential Updates )

Among Constituent Heterogeneous )

Data Sources" )

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**In the United States Patent and Trademark Office**

In re the Application of:

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and AMENDMENT UNDER 37 CFR §1.121**

Commissioner for Patents

PO Box 1450

Alexandria, Virginia 22313-1450

Sir:

Responsive to the Official Action dated March 4, 2005, please receive our reply and amendment. Reconsideration of the rejections of the Office Action is hereby requested.

Respectfully,

*Robert Frantz*

Agent for Applicant(s)  
Robert H. Frantz, Reg. No. 42,553  
Tel: (405) 812-5613

**Certificate of Transmission under 37 CFR §1.8**

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